

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.L.P.E. CLASSIFIER		6	3-16-79
FORMALITY REVIEW	(Signature)		6-4-99

INDEX OF CLAIMS

☒ Rejected  
☐ Allowed  
☐ (Through numeral) Canceled  
☐ Restricted  
☐ N Non-elected  
☐ I Interference  
☐ A Appeal  
☐ O Objected

Final	Original	Date	Claim	Date	Final	Original	Date	Claim	Date
			1					101	N
			2					102	V
			3					103	V
			4					104	V
			5					105	V
			6					106	V
			7					107	V
			8					108	V
			9					109	V
			10					110	V
			11					111	V
			12					112	V
			13					113	V
			14					114	V
			15					115	V
			16					116	V
			17					117	V
			18					118	V
			19					119	V
			20					120	V
			21					121	V
			22					122	V
			23					123	V
			24					124	V
			25					125	V
			26					126	V
			27					127	V
			28					128	V
			29					129	V
			30					130	V
			31					131	V
			32					132	V
			33					133	V
			34					134	V
			35					135	V
			36					136	V
			37					137	V
			38					138	V
			39					139	V
			40					140	V
			41					141	V
			42					142	V
			43					143	V
			44					144	V
			45					145	V
			46					146	V
			47					147	V
			48					148	V
			49					149	V
			50					150	V

If more than 150 claims or 10 actions  
staple additional sheet here